



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 89577

**\*89577\***

Page 2

August-24-12 10:16:22 AM

Item ID: D4640-7

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Aft Wall Protector

Start Date: 8/24/12 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 9/24/12 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120

QC8- Inspect parts - second check

0.00

Smp  
12.9.18**\*120\***

QC

Memo

Quality Control

130

Identify as per dwg &amp; Stock Location: \_\_\_\_\_

0.00

P00  
89595**\*130\***

Packaging

Memo

Packaging

140

QC21- Final Inspection - Work Order Release

0.00

**\*140\***

QC

Memo

Quality Control

POSITIVE RECALL

EFFECTIVE 12/9/11 AUTH hRELEASED h DATE 12/9/18mf  
12-09-24  
GEN 12/6/18

NCR: Yes / No

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# Picklist Print

August-24-12 10:16:21 AM

Page 1

Work Order ID: 89577

Parent Item: D4640-7

Parent Item Name: Aft Wall Protector

Start Date: 8/24/12

Required Date: 9/24/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A 12.05.08 NEW ISSUE DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.093-F6006-07 GE PLASTICS LEXAN SHEET		Purchased	No			100	sf	1,452.6700	2.38	2.5052632		HB 17-9-18	

Location

Loc Qty

Loc Code

therm

1452.67

112176

40.44

114459

1412.23

114459

①

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

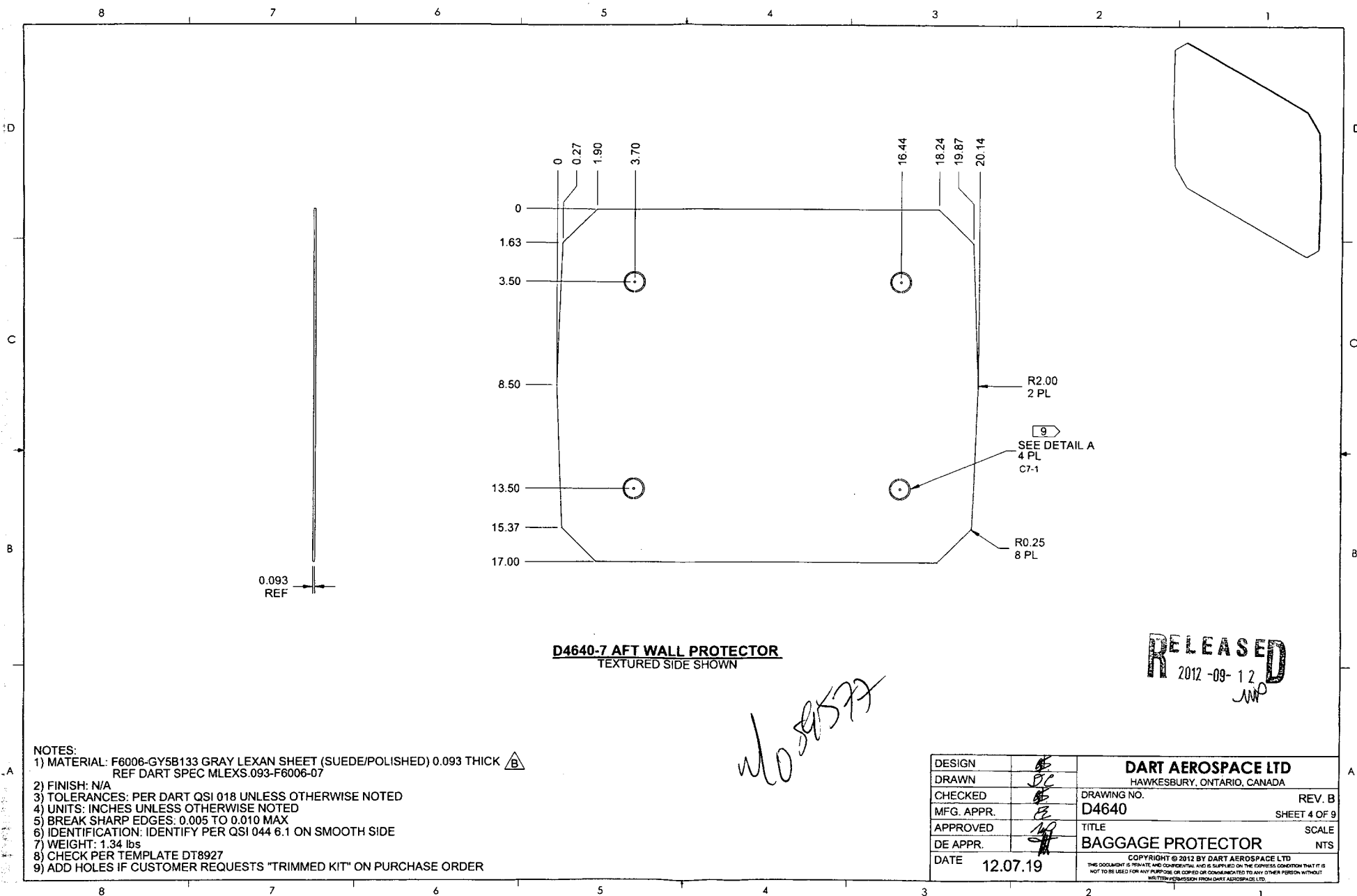
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

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## Receiving Report

Date: 10/4/21

Batch No: 2114459

Supplier: SABIC

Dart P/O: 11420

Packing Slip: Yes ☒ No ☐  
 Invoice: Yes ☐ No ☒  
 Receipt: Cash ☐ Cr ☒

Release Note Attached: Yes ☒ No ☐ N/A ☐  
 Waybill Attached: Yes ☒ No ☐ N/A ☐  
 Shipment Complete: Yes ☒ No ☐ N/A ☐  
 QC6 Inspection ☒ N/A ☐  
 Work Order 610012 N/A ☒

**Discrepancies**

Part Number	Description	Quantity Ordered	Quantity Received	Quantity Returned	Quantity Short	Comments

Initials of receiver (if shipment OK) Level 12

LU

Production/Admin: 10/4/21  
 Date  
 Received/Costing    
 Initial  

Location

# SABIC Polymershapes

سابك  
sabic

INVOICE NO.	0090639/M
INVOICE DATE	20.04.10
TAKEN BY	caldwellj
G.S.T. REG. NO.	856372750RT0001
CARRIER	

## INVOICE

PST 85637 2750 TR000

SOLD TO: DART AEROSPACE LTD

SHIP TO: DART AEROSPACE LTD

1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
Canada

1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
Canada

A/C 22.28

CUSTOMER DARAER	SHIP VIA EPIC	TAX LIC 1 CHARGE GST	TAX LIC 2 6112-5207	INVOICE TERMS NET 30 DAYS	SALES ORDERPAGE O90164 1 99	WHS.
CUSTOMER P.O. 11420	SHIP DATE 20.04.10	FREIGHT TERMS PREPAID + CHARGE	SALES REP. WADE DIXON	S.D.N. 01	BILL OF LADING	Sch. Date 20.04.10
						Sales Office 99

LN	PRODUCT	ORDER	B/O	SHIP	SKU	DESCRIPTION	PRICE	PER	EXTENSION
001	41202630	61	0	61	SHT	F6006-GY5B133 GREY .093 X 52 X 96	1 217.95	SHT	13294.95
002	0000005	1	0	1	EA	THANK YOU FOR SELECTING SABIC POLYMERSHAPES FREIGHT GST PAYABLE @ 5%	1 .00	EA	0.00
						PLEASE PAY THIS AMOUNT			125.00 671.00 14090.95
***** *** IF YOU ARE NOT CURRENTLY RECEIVING OUR INVOICES *** *** VIA EMAIL OR FAX, PLEASE SUPPLY US WITH AN EMAIL *** *** ADDRESS OR FAX NUMBER . FAX TO 905-789-3161 *** *****									

RECEIVED APR 23 2010

PLEASE Remit To: SABIC Polymershapes 9150 Airport Road Brampton ON L6S 6G1  
Phn : (613)745-7043 Fax : (613)745-4291

NO GOODS TO BE RETURNED WITHOUT APPROVAL FROM US. ALL DISCREPANCIES MUST BE REPORTED WITHIN 3 DAYS.

## Purchase Order Receipt Listing

Page 1 of 1

April 21, 2010 1:17:20 PM

All amounts are calculated in domestic currency.

All Vendors PO ID PO11420 Receipt Dates from 4/21/2010 to 4/21/2010 All Line Item Types

All Item ID/GL/WOs All Rec. Employees All Currencies

Grouped by Vendor ID

Purchase Order ID/ Curr Type	Line Nbr/ Insp Req	Project ID	Reference/ Description/ Cert Std	PO U/M / Stock U/M	Required Date Required Qty	Recv Date/ Recv Emp	Recv Qty (PO U/M)	Cost Per Unit/ Recv Value	Inspected Qty/ Rejected Qty (PO U/M)	MRB Qty/ MRB Reject Qty	Book Amt
VendorID\Vendor Name		VC-GEP001	SABIC Polymershapes								
PO11420	1		MLEXS.093-F6006-07	sf	4/26/2010	4/21/2010	2,114.6660	\$6.29	0.0000	0	\$13,294.91
CAD	No		GE PLASTICS LEXAN SHEET 114459	sf	2,114.6660	DCUSER		\$13,294.91	0.0000	0	

\*\*\* SHIPPER \*\*\*

SABIC PolymerShapes  
1250 Old Innes Rd., Unit 519

A/C 10.18

Ottawa, Ontario K1B 5L3  
PST 95637 2150 TR0001  
PHONE: (613)745-7043 FAX: (613)745-6291

Page: 1

SOLD TO: DART AEROSPACE LTD

SHIP TO: DART AEROSPACE LTD

1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
Canada

1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
Canada  
1-613-632-5200

Our Order No	Customer	GST License	PST License	Invoice Terms	Ordered	Shipped	Taken By	RDD
090164	DARABR	CHARGE GST	6112-5207	NET 30 DAYS	24.02.10		caldwel	26.04.10
Ship Doc No	Salesrep	Customer P.O.#	Shipped Via	F.O.B.	Freight Terms	Inv. No.	Ship Date	
C1	23	11420	BPIC		PREPAID + CHARGE		26.04.10	
Ln# Location	Ord	B/C	Ship Sku	Product Code	Description	U/Price		

\*\*\*\*\*  
DELIVERIES TO BE DONE BEFORE  
4:00 PM, ADVISE SHIPPING CO.  
\*\*\*\*\*

001 56 56 0 SHIP 41202630

F6906-CY5B133 GRAY  
.093 X 52 X 96

(61) ✓

105365

002 1 0 1 EA 0000005

THANK YOU FOR SELECTING  
SABIC POLYMERSHAPES

11/10/12

LINE No.	RECEIVING No.	PICKED BY	DATE	SHIPPED BY	DATE	VERIFIED	DATE

NO GOODS TO BE RETURNED WITHOUT APPROVAL FROM SABIC. ALL DISCREPANCIES MUST BE REPORTED WITHIN 10 DAYS.  
ALL RETURNS MUST HAVE VALID RETURNED GOODS AUTHORIZATION NUMBER CLEARLY MARKED ON ALL PACKAGES.

SABIC  
Innovative  
Plastics

سابك  
sabic

**SABIC Polymershapes**

1250 OLD INNES RD. 519 OTTAWA, ONT. K1B 5L3  
TEL: 613 745 7043 FAX: 613 745 8163

## CERTIFICATE OF COMPLIANCE

SOLD TO: DART AEROSPACE

DATE: 2/25/2010

YOUR PURCHASE ORDER 11420

OUR SHIPPER NO: 090164

LINE ITEM #: 1

QUANTITY: 56 SHEETS

DESCRIPTION: 093 X 52 X 96 LEXAN F6006-GY5B133 GREY

THESE PARTS WERE MANUFACTURED IN ACCORDANCE WITH: FAR 25.853

THIS IS TO CERTIFY THAT THE MATERIAL FINISHES AND FUNCTIONAL REQUIREMENTS OF THE ABOVE LISTED PARTS ARE IN ACCORDANCE WITH THE REFERENCE PROCUREMENT SPECIFICATIONS, CONTROL DRAWINGS OR PARTS DESIGNATION AND LATEST REVISIONS AS REFERENCED ON THE SUBJECT PURCHASE ORDER.

AUTHORIZED REPRESENTATIVE SIGNATURE

*Jon Caldwell*

JON CALDWELL  
BRANCH MANAGER

# SABIC Polymershapes

سابك  
sabic

## ORDER CONFIRMATION

ORDER	090164
Date	24.02.10
GST Registration #	856372750RT0001
Taken By:	caldwellj

Sold To

DART AEROSPACE LTD

1270 ABERDEEN STREET  
HAWKESBURY, ON K6A 1K7  
Canada

Ship To

DART AEROSPACE LTD

1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
Canada

A/C

Customer DARAER	Ship Via EPIC	TAX LIC 1 CHARGE GST	TAX LIC 2 6112-5207	A/R Terms NET 30 DAYS	F. O. B.	Page 1
P. O. # 11420	Expiry Date 24.02.12	Freight Terms PREPAID + CHARGE	Sales Representative 93	Sched Ship 26.04.10	Dept.	
Product	Quantity	SKU	Description	Price	Per	Extension
41202630	56	SHT	P6006-GY5B133 GREY .093 X 52 X 96	217.95	SHT	12205.20
0000005	1	EA	THANK YOU FOR SELECTING SABIC POLYMERSHAPES	.00	EA	0.00
* ORDER CONFIRMATION * Total						12205.20 =====
<p>This is to verify receipt of the above-referenced order. Upon acceptance of the order, SABIC Polymershapes will fill the order on its standard terms and conditions of sale unless, prior to shipment of all or part of this order, you provide written objections to such standard terms and conditions of sale or unless other terms have been agreed to in writing signed by SABIC Polymershapes.</p>						
31.12.20						
SABIC Polymershapes 1250 Old Innes Rd., Unit 519 Ottawa, Ontario K1B 5L3 PST 85637 2750 TR0001 Phn : (613)745-7043 Fax : (613)745-4291						





Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

\*\*\*PO REPRINT\*\*\*

Purchase Order ID PO11420

Purchase Order Date 2/24/10

PO Print Date 2/25/10

Page Number 1 of 1

Order From :

VC-GEP001

SABIC POLYMERSHAPES  
9150 AIRPORT ROAD  
BRAMPTON, ON L6S 6G1  
CA

Contact Name

Vendor Phone 800 267 1575

Vendor Fax 613 745 4291

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr 10127-2607

Terms

Net 30

Currency

CAD

FOB

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req. Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MLEXS.093-F6006-07	GE PLASTICS LEXAN SHEET	4/26/10 Yes	<u>2114.664</u> 1,941.33 sf	Purolator ground	\$6.2870	\$12,205.14
PO Total:							\$12,205.14

Change Nbr: 3

Change Date: 2/25/10

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required when applicable